

OFFICE OF THE UNIVERSITY REGISTRAR  
VANDERBILT UNIVERSITY  
PMB 407701, 110 21st AVENUE SOUTH  
NASHVILLE, TN 37240-7701  
FAX 615-343-5035

Send transcript by: ☐ Mail ☐ Will Pickup at Registrars Office

Number of copies requested for this order \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Name

\_\_\_\_\_  
Last First Middle

Maiden Name \_\_\_\_\_

Name at enrollment if different from above \_\_\_\_\_

If not currently enrolled, last semester and year you were enrolled \_\_\_\_\_

School \_\_\_\_\_

Mail transcript to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Special Handling Requests:

☐ Hold for current semester grades ☐ Hold for degree to be posted

All transcripts are mailed in separate, sealed envelopes with the Registrars signature.

Your Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Your Phone \_\_\_\_\_

Your Email \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Please print clearly and complete all sections.

Transcripts will not be issued to students with financial holds.